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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MINNESOTA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Charles First name H. Middle name Hutchinson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.	ASF Gotta Go Gotta Throw Incorporated ASF Little Flyers, LLC		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1425		

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Case number (if known)

Debtor 1 Charles H. Hutchinson

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1200 Mendelssohn Avenue N Suite 200 Minneapolis, MN 55427				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Hennepin				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Charles H. Hutchinson

ar	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11						
	choosing to file under							
			hapter 12					
		□ с	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the fee	eck with the clerk's office in your local court for mor yourself, you may pay with cash, cashier's check, c chalf, your attorney may pay with a credit card or ch	or money	
					tallments. If you choose this ops (Official Form 103A).	tion, sign and attach the Application for Individuals	to Pay	
			but is not requapplies to you	uired to, waive y ur family size an	your fee, and may do so only if and you are unable to pay the fee	ion only if you are filing for Chapter 7. By law, a jud your income is less than 150% of the official poverty in installments). If you choose this option, you mus fficial Form 103B) and file it with your petition.	y line that	
	Hove you filed for							
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
	acto youro.		District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	9S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□No	Go to li	ine 12.				
	residence?	■ Ye	es. Has yo	ur landlord obta	ained an eviction judgment agai	nst you and do you want to stay in your residence?		
		. •		No. Go to line	12.			
				Yes. Fill out <i>Ini</i> bankruptcy pet		n Judgment Against You (Form 101A) and file it wit	h this	

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Deb	otor 1 Charles H. Hutch	inson		Document Pag	ge 4 of 10	Case number (if known)
D	Day and Alband Anna B		V 0	and Oaks Branchistan		
Par	t 3: Report About Any B	usinesses	You Owr	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code		
	it to this petition.		Chec	k the appropriate box to describe y	our business:	
				Health Care Business (as define	d in 11 U.S.C.	§ 101(27A))
				Single Asset Real Estate (as def	ined in 11 U.S.	C. § 101(51B))
				Stockbroker (as defined in 11 U.S	S.C. § 101(53A	N))
				Commodity Broker (as defined in	11 U.S.C. § 1	01(6))
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operatio	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu in 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am ı	ot filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am i Code	•	OT a small bus	iness debtor according to the definition in the Bankruptcy
		☐ Yes.	I am i	ling under Chapter 11 and I am a	small business	debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own o	r Have An	y Hazardo	us Property or Any Property Tha	at Needs Immo	ediate Attention
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?		
	identifiable hazard to					

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Charles H. Hutchinson

nson Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consult individual primarily for a personal,			.C. § 101(8) as "incurred by an		
			No. Go to line 16b.					
			☐ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			Yes. Go to line 17.					
		16c.	State the type of debts you owe the	nat are not consumer debts o	r business debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available ■ No □ Yes			ed and administrative expenses		
18.	How many Creditors do you estimate that you owe?	1-49 50-99 100-1 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	□ 50,0	01-50,000 01-100,000 e than100,000		
19.	How much do you estimate your assets to be worth?	\$100 ,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 millior □ \$10,000,001 - \$50 milli □ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 m	on	0,000,001 - \$1 billion 00,000,001 - \$10 billion 000,000,001 - \$50 billion e than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10 million \$10,000,001 - \$50 milli \$50,000,001 - \$100 mill \$100,000,001 - \$500 m	on	0,000,001 - \$1 billion 000,000,001 - \$10 billion ,000,000,001 - \$50 billion re than \$50 billion		
Part	7: Sign Below							
	you	I have ex	amined this petition, and I declare	under penalty of perjury that	the information provide	ed is true and correct.		
			chosen to file under Chapter 7, I an tates Code. I understand the relief a					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, and 3571. /s/ Charles H. Hutchinson						
		Charles	s H. Hutchinson e of Debtor 1	Signature	of Debtor 2			
		Executed	d on February 10, 2017	Executed	on			
			MM / DD / YYYY		MM / DD / YYYY			

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John F.	Hedtke	Date	February 10, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
John F. He	edtke			
Printed name				
Hedtke La	w Office			
Firm name				
1217 E. 1s	t Street			
Duluth, Mi	N 55805			
Number, Street,	City, State & ZIP Code			
Contact phone	218-728-1993	Email address	john@hedtkelaw.com	
0167666				
Bar number & S	ate			

ASSOCIATED BANK - WI MAIL STOP 7070 PO BOX 19097 GREEN BAY WI 54307

CAPITAL ONE PO BOX 30285 SALT LAKE CITY UT 84130

CARL PEACH
3770 PILGRIM LANE
MINNEAPOLIS MN 55441

CHASE

ATTN: CORRESPONDENCE DEPT PO BOX 15298 WILMINGOTN DE 19850

CHASE CARD ATTN: CORRESPONDENCE PO BOX 15298 WILMINGTON DE 19850

COMMERCE BANK ATTN: KC REC -10 PO BOX 419248 KANSAS CITY MO 64141

DISCOVER FINANCIAL PO BOX 3025 NEW ALBANY OH 43054

ELISABETH HUTCHINSON 2601 E 6TH ST DULUTH MN 55812

ERIC A. RICE, LLC 1 W WATER STREET, STE. 275 SAINT PAUL MN 55107 FORD MOTOR CREDIT
NATIONAL BANKRUPTCY SERVICE CENTER
PO BOX 62180
COLORADO SPRINGS CO 80962

GOTTA GO GOTTA THROW INCORPORA

HUGHS MATHEWS GREER, PA JOHN F. MATHEWS 622 ROOSEVELT ROAD, STE 280 SAINT CLOUD MN 56301

IRS
PO BOX 7346
PHILADELPHIA PA 19101-7346

LYNETTE HUTCHINSON 13001 FAIRFIELD RD WEST HOPKINS MN 55305

MINNESOTA DEPARTMENT OF REVENU PO BOX 64564 SAINT PAUL MN 55164-0564

PETER THEOBALD 959 BEECH ST SAINT PAUL MN 55106

PORTFOLIO RECOVERY PO BOX 41067 NORFOLK VA 23541

SETERUS INC 14523 SW MILLIKAN WAY ST BEAVERTTON OR 97005 STEVE HOWLE 1402 CORTO DRIVE DALLAS TX 75218

SYNCHRONY BANK/CARE CREDIT PO BOX 965064 ORLANDO FL 32896

VERIZON
VERIZON WIRELESS BANKRUPTCY ADMINISTRATI
500 TECNOLGY DR STE 500
WELDON SPRINGS MO 63304